

SMALLBURGH  
RURAL DISTRICT COUNCIL.

**ANNUAL REPORT**

of the  
Medical Officer of Health  
for the  
Year 1955

G. B. HOLTRY,  
M.D., F.R.C.P., D.P.H., D.I.H.



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## MEMBERS OF THE HEALTH COMMITTEE.

1955 — 1956.

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## HEALTH DEPARTMENT.

1955.

### Medical Officer of Health.

G. R. HOLTBY, M.D., B.S., D.P.H., D.I.H.

### Surveyor and Senior Sanitary Inspector.

Norman F. Cripps, F.A.L.P.A., M.R.S.H., A.I. Hsg., Cert. S.I.B.

### Additional Sanitary Inspector.

A. E. Ford, Cert. R.S.I.

# SMALLBURGH RURAL DISTRICT COUNCIL.

*Council Chambers,*

*Stalham.*

*To the Chairman and Members of the*

*Smallburgh Rural District Council.*

Ladies and Gentlemen,

I have the honour to present the Annual Report on the Health and Sanitary circumstances of the district for the year 1955. This is the eighth report to be presented since the coming into force of the National Health Service Act, 1946.

The Registrar-General estimated the mid-year population as 18,120 compared with 18,240 in 1954. There were 217 live births and 200 deaths, giving a natural increase of 17. There was thus a small movement of people out of the district. The crude birth rate is 11.98 per thousand of the population, and the crude death rate 11.04 per thousand of the population. By use of the comparability factor supplied by the Registrar-General, the birth rate becomes 13.90, and the death rate 9.16. The purpose of this factor is to modify local rates to those of a population with an age and sex distribution of England and Wales as a whole. The standard rates for England and Wales are Birth Rate 15.0 and Death rate 11.7.

The principal causes of death were again Cardio-Vascular Disease and Cancer in all forms, which account for 55.5% and 19% of all deaths respectively. These are sometimes referred to as the degenerative diseases, though they by no means always affect elderly people. Can anything be done to reduce their incidence? Much research work is being devoted to the problem and this much is known:—Coronary artery disease is more likely to occur, other factors being equal, in those who are less physically active. Diet is probably also important, very “rich” diets containing much cream and fat being dangerous. These two factors may explain why this disease is common in North America. There may be others, such as heavy smoking and a harassed mode of life.

We do not know yet whether the problem of Cancer is fundamentally one problem, or whether there are various noxious agents causing various types of cancer. In the case of cancer of

the lungs, while atmospheric pollution may play a part, there can be no doubt that heavy smoking, particularly cigarette smoking of over 20 cigarettes a day, if indulged in for a long period, carries a risk of incurring this disease. Youth should be discouraged from starting the smoking habit.

For probably the first time, Dysentery heads the list of notified infectious diseases, and the actual number of cases probably greatly exceeded those notified. This is chiefly because diagnosis is often very difficult without an examination of stool specimens.

The annual increase in the number of cases of this disease is a national problem, but certain measures can be taken to limit its spread. The first is to realise the infectivity of many cases of diarrhoea. While, no doubt dietary indiscretions sometimes cause alimentary upsets, diarrhoea is seldom a prominent symptom in these cases. It is wise to regard its occurrence as due to an infection, and to obtain medical advice. At the same time, the hygienic precautions against food poisoning which should always be observed, must be rigidly adhered to when infection is suspected. The ritual of hand washing after every visit to the lavatory and before handling food should be taught to every child; for "food handlers" it is essential.

Flies should be excluded as far as possible from excreta and from food, and the germs which occur in septic sores, and which are spread in their myriads by every cough and sneeze should be kept from food which other people have to eat.

While Dysentery, unlike the salmonella and staphylococcal outbreaks is probably not a true food poisoning, it is probably spread by direct contact. Lavatory seats, lavatory chains, water taps and even towels can harbour germs, and should be kept clean with soap and water. Disinfectants have their place, but strong solutions can injure delicate skins. Individual towels are preferable to communal ones, in particular the roller towels, unless the latter are changed frequently.

Dysentery is expensive. The time spent and travelling carried out by your Staff in the investigation of cases through the year was no small item.

I have mentioned above that all children should be taught to wash their hands automatically after using the toilet. Equally automatic should be the cleaning of teeth before going to bed at night. Some children, when interrogated, state proudly that they clean their teeth in the morning when they rise, but not at

night. One often finds that they have a sweet to suck to help them to sleep, or perhaps as a bribe to persuade them to settle down for the night! The sugar in the sweet will form acid between the teeth, and it will eat into their enamel to allow decay to enter the underlying dentine. During the day time, the constant movement of the tongue will help to clean the teeth to a certain extent, but at night it is still, and while parents may think this is a blessing, it means that the teeth must always be cleaned before retiring. Certainly they are with benefit also cleaned after breakfast, and indeed after all meals if possible, but the use of the tooth brush "last thing" should be invariable. The now ready availability of sweets and chocolate, and the fact that fluoridation of the water supply will not be coming to this district in the near future, make this particularly important.

During the year, immunisation against Poliomyelitis was practiced on a large scale in North America, and while it had not started in this country, the experience gained there was very helpful to the British Scientists, who later came to prepare a vaccine for use in this country. One early disaster, the contamination of the vaccine with a living virus, while it made American authorities introduce precautions which effectively prevented its recurrence in the many millions of injections carried out subsequently and which led to the British carrying out even more stringent precautions, had the unfortunate effect of prejudicing some people in this country against the vaccine. The subsequent success of the programme in the U.S.A. and in Canada, where at no time any untoward effects followed, should dispel all doubts in the minds of parents, who are right to think carefully about the value of new remedies and preventive measures.

No such caution is necessary in the case of immunisation against Diphtheria and Whooping Cough, and vaccination against Smallpox. The majority of school children are protected against Diphtheria, as "booster" injections of the immunising agent are given routinely in the schools by the School Medical Officers, but this happy position does not obtain in the case of young children. Only 51% of the babies born during the year were immunised. We cannot be sure of preventing a recurrence of this very serious disease, unless the percentage rises to 75%. The usual practice now is to combine immunisation against it with that against Whooping Cough, which because of its chest complications is the most dangerous of the common infectious diseases of childhood at the present time. It is during its first year that the baby is most vulnerable to these complications and this provides another reason why parents should get their babies protected as soon as possible.

The position with regard to vaccination against Smallpox is even less satisfactory. What the eye doesn't see, the heart doesn't grieve about, and memories of the scourge of smallpox, as of diphtheria, are dim, but the eye may easily read in the newspaper tomorrow or in about a month's time that smallpox has appeared again in this country. Two serious outbreaks have occurred in Yorkshire and Sussex in the last few years. With the increasing speed of air travel, it is quite possible for persons apparently healthy, but in the incubation period of the disease to arrive in this country from abroad and to cause local outbreaks to start.

When the babies of to-day are grown up, they may well require to travel abroad for pleasure or necessity. If they have been vaccinated as infants, they will be in a strong position compared to those who have not been vaccinated, for while vaccination should always be repeated when going abroad to an endemic area, or when likely to be in contact with a case of the disease, the risks of primary vaccination and its unpleasant effects are much less for babies than for older people. The risks and reactions attached to secondary vaccination are negligible.

I wish to record my thanks to the Chairman and Members of the Public Health Committee for their kindness and support, and my appreciation of the work of the staff of the department, including the clerical staff, who have carried out their duties, often onerous ones, conscientiously and with keenness.

I have the honour to remain, Ladies and Gentlemen,

Your obedient Servant,

G. R. HOLTBY,

*Medical Officer of Health.*

26th October, 1956.

## SECTION A.

### NATURAL AND SOCIAL CONDITIONS.

**Area**—(in acres) 70,017. The administrative centre of the area is at Stalham with a surrounding district which is entirely rural in character, with Agriculture and Dairy Farming as the main industry. The district includes a large area of the Broad, 13 miles of coastline and many historical villages which attract many thousands of visitors during the holiday season.

**Population.** The Registrar-General has estimated the population for the mid-year 1955 as 18,120, giving a population density of .26 per acre.

**Number of Inhabited Houses.** According to the Rate Book, the number of Inhabited Houses in the district is 6,416, the Rateable Value being £76,436. The sum represented by a Penny Rate is £306 9s. 5d.

### SUMMARY OF VITAL STATISTICS.

Area in acres	..	..	..	..	..	70,017
Population (Registrar-General's mid-June estimate)	..	..	..	..	..	18,120
No. of Inhabited Houses according to Rate Book	..	..	..	..	..	6,416
Rateable Value	..	..	..	..	..	£76,436
Sum represented by a Penny Rate	..	..	..	..	..	£306 9s. 5d.

			<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate per Thousand</i>	<i>Rate England &amp; Wales</i>
<b>Live Births—</b>							
Legitimate	..	..	208	115	93	11.98	15.0
Illegitimate	..	..	9	4	5		
			<hr/> 217	<hr/> 119	<hr/> 98		
<b>Still Births—</b>							
Legitimate	..	..	7	5	2	0.441	0.36
Illegitimate	..	..	1	1	—		
			<hr/> 8	<hr/> 6	<hr/> 2		
<b>Deaths (all causes)</b>	..	..	200			11.04	11.7
			<i>Total</i>	<i>Male</i>	<i>Female</i>	<i>Rate per Thousand</i>	<i>Rate England &amp; Wales</i>
<b>Infant Mortality—</b>							
Legitimate	..	..	2	1	1	13.8	24.9
Illegitimate	..	..	1	—	1		
			<hr/> 3	<hr/> 1	<hr/> 2		
<b>Deaths from Special Diseases—</b>							
Measles (all ages)	..	..	..	..	..	..	—
Whooping Cough (all ages)	..	..	..	..	..	..	—
Enteritis (under 2 years of age)	..	..	..	..	..	..	1
Cancer (all ages)	..	..	..	..	..	..	36
Tuberculosis (all ages)	..	..	..	..	..	..	3

**Birth Rate, Death Rate, Analysis of Mortality and Case Rates of  
Certain Infectious Diseases in the year 1955.**

							<i>England &amp; Wales</i>	<i>Smallburgh R.D.C.</i>
							<i>Rates per 1,000 population</i>	
<b>Births—</b>								
Live	..	..	..	..	..	..	15.0	11.98
Still	..	..	..	..	..	..	0.36	0.44
							23.2 (a)	35.2 (a)
<b>Deaths—</b>								
All causes	..	..	..	..	..	..	11.7	11.04
Whooping Cough	..	..	..	..	..	..	0.00	0.00
Diphtheria	..	..	..	..	..	..	0.00	0.00
Tuberculosis	..	..	..	..	..	..	0.15	0.16
Influenza	..	..	..	..	..	..	0.07	0.055
Acute Poliomyelitis (including Polioencephalitis)	..	..	..	..	..	..	0.01	0.00
Pneumonia	..	..	..	..	..	..	0.49	0.27
Coronary Disease	..	..	..	..	..	..	1.59	1.65
Malignant Neoplasm Lung, Bronchus	..	..	..	..	..	..	0.39	0.16

*Smallburgh R.D.C.*

*Rates per 1,000 population*

**Notifications (corrected)—**

Typhoid Fever	..	..	..	..	..	..	0.00
Paratyphoid Fever	..	..	..	..	..	..	0.00
Meningococcal Infection	..	..	..	..	..	..	0.00
Scarlet Fever	..	..	..	..	..	..	0.33
Whooping Cough	..	..	..	..	..	..	0.72
Diphtheria	..	..	..	..	..	..	0.00
Erysipelas	..	..	..	..	..	..	0.16
Smallpox	..	..	..	..	..	..	0.00
Measles	..	..	..	..	..	..	2.09
Pneumonia	..	..	..	..	..	..	0.88
Acute Poliomyelitis (including Polioencephalitis)	..	..	..	..	..	..	0.11
Food Poisoning	..	..	..	..	..	..	0.055
Puerperal Fever and Pyrexia	..	..	..	..	..	..	0.055

**Deaths—**

							<i>England &amp; Wales</i>	<i>Smallburgh R.D.C.</i>
							<i>Rates per 1,000 Live Births</i>	
All causes under 1 year of age	..	..	..	..	..	..	24.9 (b)	13.8 (b)

(a) Per 1,000 Total (Live and Still) Births.

(b) Per 1,000 related Live Births.

# Individual Causes of Death.

	<i>Male</i>	<i>Female</i>
Tuberculosis—respiratory .. .. .	1	—
Tuberculosis—other .. .. .	—	2
Syphilitic disease .. .. .	—	—
Diphtheria .. .. .	—	—
Whooping Cough .. .. .	—	—
Meningococcal infections .. .. .	—	—
Acute poliomyelitis .. .. .	—	—
Measles .. .. .	—	—
Other infective and parasitic diseases ..	1	—
Malignant neoplasms of stomach .. ..	3	4
Malignant neoplasm, lung, bronchus ..	3	—
Malignant neoplasm of breast .. ..	—	2
Malignant neoplasm of uterus .. ..	—	1
Other malignant and lymphatic neoplasms	16	7
Leukaemia, aleukaemia .. .. .	—	2
Diabetes .. .. .	2	4
Vascular lesions of nervous system ..	18	18
Coronary disease—angina .. .. .	15	15
Hypertension with heart disease .. ..	2	4
Other heart diseases .. .. .	12	22
Other circulatory diseases .. .. .	4	1
Influenza .. .. .	—	1
Pneumonia .. .. .	—	5
Bronchitis .. .. .	1	3
Other disease of respiratory system ..	—	—
Ulcer of stomach and duodenum .. ..	1	—
Gastritis, enteritis and diarrhoea .. ..	—	1
Nephritis and nephrosis .. .. .	4	—
Hyperplasia of prostate .. .. .	1	—
Pregnancy, childbirth and abortion ..	—	—
Congenital malformation .. .. .	2	1
Other defined and ill-defined diseases ..	12	6
Motor vehicle accidents .. .. .	—	—
All other accidents .. .. .	—	—
Suicide .. .. .	2	1
Homicide and operations of war .. ..	—	—
 All causes .. .. .	 100	 100

# **INFANT MORTALITY DURING THE YEAR 1955.**

Causes of Death	Under 1 week	1-2 wks.	2-3 wks.	3-4 wks.	Total under 1 month	1-3 mth.	3-6 mth.	6-9 mth.	9-12 mth.	Grand Total under 1 year
Broncho-Pneumonia	-	1	-	-	1	1	-	-	-	2
Cerebral-haemorrhage	1	-	-	-	1	-	-	-	-	1
Totals . . .	1	1	-	-	2	1	-	-	-	3

## **Vital Statistics of the District for 1955 and previous Years. Comparative Table with England and Wales for past 10 years.**

Year	Live Birth Rate per 1,000 population		Death Rate per 1,000 population		Infant Mortality Rate per 1,000 Live Births	
	England & Wales	Smallburgh R.D.C.	England & Wales	Smallburgh R.D.C.	England & Wales	Smallburgh R.D.C.
1946	19.1	18.99	11.5	12.83	43.0	36.4
1947	20.5	21.45	12.0	12.41	41.0	31.3
1948	17.9	16.8	10.8	11.26	34.0	35.0
1949	16.7	17.9	11.7	14.56	32.0	39.7
1950	15.8	15.2	11.6	12.88	29.8	15.4
1951	15.5	15.1	12.5	12.8	29.4	32.1
1952	15.3	13.92	11.3	10.73	27.6	55.3*
1953	15.5	12.85	11.4	9.87	26.8	21.46
1954	15.2	14.12	11.3	9.80	25.5	19.38
1955	15.0	11.98	11.7	11.04	24.9	13.8

\* Exactly half of this figure was due to Prematurity.

## SECTION B.

### GENERAL PROVISIONS OF THE HEALTH SERVICES.

#### NATIONAL HEALTH SERVICE ACT, 1946.

Smallburgh Rural District is included with North Walsham Urban District and Blofield and Flegg Rural District to form No. 1 Area of the Norfolk County Council under the National Health Service Act for the purpose of carrying out duties for which the County Health Authority has accepted responsibility. The duties include Care of Mothers and Young Children, Midwifery Service, Health Visiting Service, Home Nursing Service, Ambulance Service, Vaccination and Immunisation, Prevention of Illness, Care and After-Care, Domestic Health Service and Mental Health Service. Some of these services, along with the School Service in the area, are the responsibility of the Area Medical Officer, who also acts as Medical Officer of Health of the three County Districts comprising Area No. 1 referred to above.

There are two Health Visitors and ten District Nurses with Centres established at the following places :—

#### Infant Welfare Centres.

Catfield .. ..	Village Hall ..	3rd Thursday each month.		
Felmingham ..	Village Hall ..	3rd Tuesday	..	..
Hickling .. ..	Village Hall ..	1st Wednesday	..	..
Honing .. ..	Parish Hall ..	2nd Monday	..	..
				(to 14-3-55)
Horning .. ..	Village Hall ..	3rd Monday	..	..
Neatishead ..	Victory Hall ..	Last Monday	..	..
				(to 28-3-55)
Scottow .. ..	Village Hall ..	1st Tuesday	..	..
Stalham .. ..	Church Room	3rd Wednesday	..	..
Worstead .. ..	Village Hall ..	1st Friday	..	..

#### Voluntary Weighing Centres.

Bacton .. ..	The Hall ..	2nd Friday	..	..
East Ruston ..	The Hall ..	2nd Thursday	..	..
Happisburgh ..	The Hall ..	2nd Tuesday	..	..
Scottow .. ..	R.A.F.,	1st Monday	..	..
	Coltishall			

A Doctor attends all Clinics where there is an attendance of 25 or over.

#### Other Treatment Centres.

A Centre is established at Stalham Secondary Modern School for :—

Dental Clinic .. ..	2 Sessions weekly.
Minor Ailments Clinic	2 .. monthly.
Speech Clinic .. ..	1 .. weekly.

## **General Welfare.**

A Welfare Officer with established offices at Stalham and North Walsham, has maintained contact with the general public throughout the year.

Local village Old People's Welfare Committees have organised Old People's Clubs at Potter Heigham, Hickling, Bacton, Worstead, Swanton Abbot, Stalham, Felmingham, Sea Palling, Ludham, Hoveton, Smallburgh and Dilham and these prove a useful medium by which the Welfare Officer can maintain contact with the aged residents of each village. The Welfare Officer is anxious to see such Clubs established in all the villages in the area and he is only too willing to give assistance to this end.

Contact has been regularly maintained during the year with the Smallburgh Rural District Council Officers and especially with the Clerk, Sanitary Inspector and Rent Collector. By working together it has often been possible to effect very satisfactory results, especially with threatened eviction cases. It has not been necessary to provide residential accommodation under Part III of the National Assistance Act for evicted families during the year.

The average number of cases assisted each week under the Norfolk County Council's Home Help Scheme was 17 and other cases have been given domestic assistance by arrangement with the National Assistance Board. The number of persons admitted to Chronic Sick Hospitals and County Homes was 40. The Welfare Officer is also the Duly Authorised Officer under the Lunacy Acts and the Mental Deficiency Acts and in this capacity he has made numerous domiciliary visits to mental defectives living in the community and to patients discharged from, or on leave from, mental hospitals.

## **Ambulance Service.**

This service is operated by the St. John Ambulance Brigade and British Red Cross Society as Agents of the County Council.

## **Vaccination and Immunisation.**

This service is also the responsibility of the County Health Authority and is carried out by General Practitioners and by Assistant County Medical Officers.

## **Laboratory Facilities.**

Facilities for Laboratory investigation are to be had at the Public Health Laboratory, Bowthorpe Road, Norwich, who are the suppliers of lymph for vaccination.

**National Assistance (1948) Act, Section 47.** (Removal to suitable premises of persons in need of care and attention).

No action was necessary during the year.

## SECTION C.

### SANITARY CONDITIONS OF THE DISTRICT.

#### Water Supply.

The very close check on the sources of water supply in the district continued throughout the year, and it is again possible to report that the public supplies were very satisfactory. Only 4 out of the 112 samples taken from the mains showed minor trouble and then from mains which had very little use. The results of the samples from private sources were a little better than in 1954, but the figures do again emphasise the possible dangers of water borne epidemics from these supplies and the need for obtaining as wide a main distribution as possible for the district and the closure of these unsatisfactory private supplies.

The results of the 170 samples taken can be summarised as follows :—

Result.	<i>Chemical Examination</i>			<i>Bacteriological Examination</i>	
	<i>Private Supply</i>	<i>Public Supply</i>		<i>Private Supply</i>	<i>Public Supply</i>
Satisfactory ..	2	7	..	31	108
Unsatisfactory ..	1	—	..	17	4

Reasonably satisfactory progress was made during 1955 with the extension of the water mains. The Area ' C ' scheme in the Norwich City Statutory area of the district, covering in addition to Hoveton and Horning, the parishes of Tunstead, Scottow, Sloley, Smallburgh, Ashmanhaugh and Neatishead, was finally completed in December, which, with the taking of bulk supplies from this scheme brought the Dilham, Swanton Abbot and Worstead mains into use which had been laid earlier in the year.

Further main laying under the Area ' B ' scheme centred at the Ludham headworks, was carried out at Sea Palling, Ludham and Potter Heigham, but as progress was slow at the headworks due to delays in the delivery of pumping plant, it was not possible during 1955 to allow the general connection of properties to these new mains.

In November, tenders were received for the remainder of the main laying in Stage 1 of the Area ' A ' scheme, covering the north eastern parishes of the district and centred at East Ruston, with water towers at Happisburgh and Knapton.

At 31st December, 1955, there were approximately 73 miles of water mains in the Rural District, 30 miles being in the Norwich City Statutory area and 43 miles in the remainder of the district.

In considering the summarised information on water supplies given in the table below, it should be noted that the parishes are not, in many instances completely covered by mains, and in consequence many properties off route cannot be served with mains water. Further, as many of the new mains were only completed towards the end of the year, the figures for properties connected in the parishes concerned are low. The information relating to the Norwich City Statutory area has been kindly supplied by the City Waterworks Engineer and Manager.

Parishes served	Estimated number of occupied properties.	Estimated population.	Number of properties with direct supply.	Number of standpipes.	Number of metered supplies.	Number of schools supplied.
<b>NORWICH CITY STATUTORY AREA</b>						
ASHMANHAUGH .. ..	53	153	5	—	—	—
HORNING .. ..	286	813	173	—	20	1
HOVETON .. ..	532	1445	330	—	25	1
NEATISHEAD .. ..	174	460	32	—	—	1
SCOTTOW .. ..	220	1376	151	—	—	—
SLOLEY .. ..	72	216	14	—	—	—
SMALLBURGH .. ..	135	406	9	—	3	1
TUNSTEAD .. ..	159	497	57	—	9	1
<b>BULK SUPPLY AREAS</b>						
DILHAM .. ..	111	328	1	—	1	1
SWANTON ABBOT .. ..	132	340	2	—	—	—
WORSTEAD .. ..	262	740	76	—	3	1
<b>LUDHAM SUPPLY AREA</b>						
CATFIELD .. ..	224	680	117	—	15	1
HICKLING .. ..	276	800	162	—	20	1
INGHAM .. ..	131	390	37	—	15	1
LUDHAM .. ..	321	980	8	—	—	—
POTTER HEIGHAM .. ..	255	696	—	—	—	—
SEA PALLING .. ..	235	478	121	1*	18	1
STALHAM .. ..	444	1232	384	19	42	2
SUTTON .. ..	162	470	95	—	19	1
<b>PARISH SCHEME</b>						
HONING .. ..	116	329	31	—	4	1

\* Public Drinking Fountain.

## Sewerage.

The Annual Report for 1953 gives details of the Stalham Parish Sewerage Scheme which is still the only village in the Rural District which is publicly sewered. There are 18 small sewerage schemes covering 20 Council housing estates, in operation in various parts of the district.

Sewerage of Hoveton, which is so urgently required, has not yet reached tender stage.

## Collection and Disposal of Refuse.

The amended refuse collection scheme commenced in April 1954, and described in the Annual Reports for 1953 and 1954, continued to function satisfactorily throughout the year. Cesspool emptying did, however, reach a new record figure with a 50% increase of cesspool liquid removed over 1954 at 1,316,600 gallons, contained in 1,861 loads, of which details are given below :—

	<i>No. of Cesspools Emptied</i>	<i>No. of Loads Removed</i>	<i>No. of Loads Chargeable</i>
Private . . . .	576 (454)	813 (639)	489 (377)
Council . . . .	290 (205)	1,048 (851)	996 (809)
<b>Total . . . .</b>	<b>866 (659)</b>	<b>1,861 (1,490)</b>	<b>1,485 (1,186)</b>

The figures in brackets are those for 1954.

The disposal of nightsoil and cesspool liquid, particularly in late spring, was again difficult and frequently long hauls to disposal points were necessary. Certain farmers did, however, again co-operate during the year and received into straw lagoons large quantities of this liquid.

Refuse accumulated from the boats using the rivers and Broads did again during the summer months, give considerable extra work, twice weekly collections outside the normal scheme being made to many boatyards and mooring points where refuse bins had been provided. Additional bins and collecting points were brought into use when found necessary.

The tips referred to in the 1954 Report were used again throughout the year and kept in good condition by the use of the Fordson Major Tractor.

The labour strength of fourteen men remained the same as in 1954, as did the vehicles which were as follows :—

- 2, 700 gallon cesspool emptiers with nightsoil attachments.
- 5, 10 cubic yard refuse collection vehicles.
- 1, 7 cubic yard refuse collection vehicle (emergency use only).
- 1, 10 cubic yard refuse trailer.
- 1, Fordson Major tractor.

7,783 gallons of petrol were used by the Council's vehicles during the year in travelling 53,266 miles in the collection and disposal of all types of refuse.

### Complaints and Nuisances.

81 complaints were received during the year ; of these, 65 were found to be justified and the appropriate action taken to secure abatement of the unsatisfactory conditions found. One complaint was referred to another Authority and it was not necessary in any instance to take formal action for the abatement of any nuisance.

### PREVENTION OF DAMAGE BY PESTS ACT, 1949.

The full time, properly trained man employed by the Council to carry out rodent control work in all parts of the district had a very full year, as will be seen from the details given below. Up-to-date methods as advised by the Ministry of Agriculture and Fisheries are in use, and the poisons used during the year were Warfarin, Zinc Phosphide and Arsenic, with pre-baits of sausage rusk. In addition to dealing with complaints of rat and mice infestation, routine inspections of dwelling houses, shops, factories and small-holdings were carried out, and regular treatment visits to the refuse tips and sewage disposal works were made.

The particulars of the year's work are as follows :—

Number of properties inspected during the year ..	1,144
Number of properties found to be infested ..	663
Total number of pre-baits laid .. ..	15,654
Total number of poison baits laid .. ..	9,346
Number of dead rats found and destroyed ..	2,216
Number of dead mice found and destroyed ..	371

Payments made to the Local Authority for the  
services of the operative at business properties £20 5 0

## THE CONTROL OF CAMPING AND OF MOVEABLE DWELLINGS.

During 1955 a thorough check was kept on the camping grounds for moveable dwellings, there being 18 licensed sites in use for the stationing of 191 dwellings and 30 licensed plots for single caravans. These figures are comparable with those for 1954 but do not give a very true picture of the position with regard to camping, as many Club sites and other plots of land used for short periods only, are not subject to control under the provisions of the Public Health Act, 1936.

## PETROLEUM (REGULATION) ACTS, 1928 and 1936.

£76 2s. 6d. was received in fees for the 137 licences issued during 1955, in respect of the storage of 84,551 gallons of petroleum spirit. As in the past all licensed premises storing petroleum were visited at least once during the year.

## SECTION D. HOUSING.

The survey of house property called for by the passing of the Housing Rent and Repairs Act, 1954, continued in the early part of the year and culminated with the submission of a report to the Health Committee in July, 1955. This report was accepted and proposals put forward to the Ministry of Housing and Local Government for the demolition or closing of 316 dwellings, together with the re-housing of approximately 100 families in the next five years.

In an effort to prevent the further deterioration of many of the older properties, the Ministry of Housing and Local Government brought fresh impetus to the improvement and conversion of dwellings by the issue early in the year of the handbook "New Homes for Old." Thirty-nine applications for Grants to secure improvements were received during 1955 and of these 35 obtained the approval of the Council at a cost of £25,742 0s. 0d. with Grants of nearly 50% in each case to a total sum of £11,144 0s. 0d. which was over twice the value of Grants given for 1954.

No applications were received under the 1954 Act for Certificates of Disrepair.

With the continued encouragement for improvement of old houses and the construction of new ones by private enterprise, the number of Council houses in the programme for 1955 was naturally reduced and only 44 dwellings were completed during the year. The list at the end of this section of the report shows the properties in the Council's ownership at the end of the year.

It is very pleasing to be able to report that 1955 saw the last six occupied hutments in the district taken out of use with the closure of the Ludham Airfield camp. At the peak period between 1947 and 1949, 157 hutments and requisitioned properties were in use, many of them of the very poor Nissen type. The re-housing of the large number of families which has passed through the properties in such a comparatively short time is a matter upon which the Council should be congratulated.

## COUNCIL HOUSES.

Properties owned by the Council at the end of 1955 :—

### (a) Permanent Houses.

1919 Assisted Scheme	..	..	..	..	48
1923 Acts	..	..	..	..	6
1924 Acts	..	..	..	..	412
1931 (Rural Authorities) Act	..	..	..	..	28
Slum Clearance	..	..	..	..	58
1936 Act (Overcrowding)	..	..	..	..	34
1938 Act (Overcrowding and Slum Clearance)					3
(Accommodation of members of aggregate population)					..
	..	..	..	..	19
Not subsidised	..	..	..	..	83
1946 Act (a) Permanent	..	..	..	..	554
(b) Aluminium Bungalows	..	..	..	..	50
					1,295

### (1) Inspection of Dwelling-houses during the year.

1. (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts) .. .. . 441
- (b) Number of inspections made for the purpose.. 897
2. (a) Number of dwelling-houses (included under sub-head 1 above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 .. .. . 69
- (b) Number of inspections made for the purpose.. 280
3. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. . 39
4. Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be fit in all respects for human habitation 30

**(2) Remedy of Defects during the year without service of Formal Notice.**

Number of defective dwelling-houses rendered fit in consequence of informal action by the local authority or their officers .. .. .	10
---	----

**(3) Action under statutory powers during the year.**

**A. Proceedings under Sections 9, 10, 11 and 16 of the Housing Act, 1935.**

- |  |            |
|--|------------|
| 1. Number of dwelling-houses in respect of which notices were served requiring repairs .. .. . | 1          |
| 2. Number of dwelling-houses which were rendered fit after service of formal notices—          |            |
| (a) By Owners .. .. .  | 1          |
| (b) By local authority in default of Owners  | <i>Nil</i> |

**B. Proceedings under Public Health Acts.**

- |   |            |
|---|------------|
| 1. Number of dwelling-houses in respect of which notices were served requiring defects to be remedied .. .. . | 3          |
| 2. Number of dwelling-houses in which defects were remedied after service of formal notices—                  |            |
| (a) By Owners .. .. .   | 3          |
| (b) By local authority in default of Owners   | <i>Nil</i> |

**C. Proceedings under Sections 11 and 13 of the Housing Act, 1936.**

- |  |    |
|--|----|
| 1. Number of dwelling-houses in respect of which Demolition Orders were made .. .. . | 12 |
| 2. Number of dwelling-houses demolished in pursuance of Demolition Orders .. .. .    | 5  |
| 3. Number of written undertakings accepted ..  | 12 |

**D. Proceedings under Section 12 of the Housing Act, 1936.**

- |  |            |
|--|------------|
| 1. Number of separate tenements or underground rooms in respect of which Closing Orders were made .. .. .  | <i>Nil</i> |
| 2. Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit .. .. . | <i>Nil</i> |

**E. Proceedings under Section 25 of the Housing Act, 1936.**

- |   |            |
|---|------------|
| 1. Number of houses in confirmed clearance areas demolished .. .. . | <i>Nil</i> |
|---|------------|

**F. Proceedings under Housing Act, 1949.**

- |   |            |
|---|------------|
| 1. Closing Orders made under Section 3 (1) ..   | <i>Nil</i> |
| 2. Demolition Orders determined and Closing Orders substituted under Section 3 (2) .. | <i>Nil</i> |

**G. Proceedings under Local Government (Miscellaneous Provisions) Act, 1953.**

- |  |    |
|--|----|
| 1. Closing Orders made under Section 10 (1) .. | 25 |
|--|----|

**(4) Overcrowding—Part IV Housing Act, 1936.**

No action was taken under this Part during the year.

**SECTION E.**

**INSPECTION AND SUPERVISION OF FOOD.**

**Milk Supply.**

The Council's responsibility with regard to milk supply is purely on the retail and distribution side, as the control of the farms where milk is produced for wholesale or retail sale is still in the hands of the Ministry of Agriculture and Fisheries.

At the end of the year there were on the Register for the Smallburgh District, 35 distributors of milk, of whom 8 operated from outside the district. Of these, 33 were licensed to sell Tuberculin Tested and Pasteurised milk, 10 to sell Tuberculin Tested milk and 2 to sell Pasteurised milk only.

One Stop Notice in respect of tuberculous milk was issued during the year to prevent the sale of raw farm milk, but eventually after further visits and sampling by veterinary officers of the Ministry of Agriculture and Fisheries to the farm affected, the infection was certified to be cleared and the Stop Notice on the milk removed. Notices of this sort are issued to prevent the sale of milk to the public in a raw condition without some means of heat treatment.

**Slaughterhouses.**

The full impact of the passing of the Slaughterhouses Act, 1954, was felt during the year under review, as at the 5 slaughterhouses in regular use, 1,163 visits were made by your inspectors for meat inspection purposes. At least one third of these visits were outside normal office hours.

The quality of meat passing through the slaughterhouses was very satisfactory, as can be seen from the comparatively low percentages of disease conditions found; only 77 cwt. 74 lbs. of meat and offal being found unfit for human consumption.

There were 19 slaughtermen licensed by the Council and operating in the district at 31st December, 1955.

## Carcases and Offal Inspected and Condemned in whole or in part.

	<i>Cattle (excluding Cows)</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>	<i>Horses</i>
Number killed (if known)	1581	37	29	859	3971	—
Number Inspected .. ..	1581	37	29	859	3971	—
<b>All Diseases except Tuberculosis and Cysticerci.</b>						
Whole carcases condemned	—	—	—	—	2	—
Carcases of which some part or organ was con- demned .. .. .	384	4	—	7	47	—
Percentage of number in- spected affected with diseases other than Tuberculosis and Cy- sticerci .. .. .	24.3%	10.81%	—	0.81%	1.23%	—
<b>Tuberculosis only :</b>						
Whole carcases condemned	—	—	—	—	—	—
Carcases of which some part or organ was con- demned .. .. .	101	1	—	—	32	—
Percentage of number in- spected affected with Tuberculosis .. .. .	6.38%	2.70%	—	—	0.80%	—
<b>Cysticercosis</b>						
Carcases of which some part or organ was con- demned .. .. .	3	—	—	—	—	—
Carcases submitted to treatment by refrig- eration .. .. .	3	—	—	—	—	—
Generalised and totally condemned .. .. .	—	—	—	—	—	—

### Other Food Premises.

With the passing of the Food and Drugs Act, 1955, and the Food Hygiene Regulations which are dated to come into operation on 1st June, 1956, another step forward will be made in the conditions under which food is manufactured, prepared and sold to the public. During 1955 the food premises in use in the district may be broadly classified as follows :—

Butchers' Shops	..	..	12
Grocers and General Stores	..	..	93
Bakeries and Baker Shops	..	..	6
Fish Shops	..	..	7
Cafes and Restaurants	..	..	12
Licensed Premises	..	..	60

Of these premises 78 were registered under the provisions of the Food and Drugs Act, the majority being in respect of premises used for the sale of ice-cream. Only one premises was registered for the manufacture of ice-cream.

Once again, the Department, in all visits to food premises, attempted to secure improvements of a structural nature and to impress upon the management and assistants the necessity for cleanliness and personal hygiene in the handling of food.

Apart from the fresh meat previously referred to in the report, there were 601 cans of various foodstuffs found unfit for human consumption on food premises in the Rural District. This figure is lower than that for 1954.

## SECTION F.

### PREVENTION OF AND CONTROL OF INFECTIOUS DISEASE AND OTHER DISEASES.

#### Notifications (Corrected).

	No.		No.
Scarlet Fever	.. .. 6	Erysipelas	.. .. 3
Whooping Cough	.. .. 13	Food Poisoning	.. .. 1
Measles	.. .. 38	Infective Hepatitis	.. .. 13
Acute Pneumonia	.. .. 16	Poliomyelitis	.. .. 2
Dysentery	.. .. 39		

#### DIPHTHERIA IMMUNISATION.

(for whole of No. 1 Area)

Age at 31/12/55 (i.e., born in year)	Under 1 yr. (1955)	1-4 years (1954-1951)	5-14 years (1950-1941)	15 years or over	Total
No. Immunised—					
(a) Primary .. ..	321 (51%)	176	151	—	648
(b) Reinforcement	—	33	573	—	606
Total—					
(a) .. .. .	Children under 5 years .. .. .				497
	Children under 15 years .. .. .				648
(b) .. .. .	All ages .. .. .				606

**VACCINATION AGAINST SMALLPOX.**  
(for whole of No. 1 area)

No. Vaccinated ..	292	19	6	16	333
No. Re-vaccinated ..	—	4	9	43	56

**TUBERCULOSIS.**

The following are the Mortality Rates :—

Pulmonary Tuberculosis Mortality Rate 0.055 per 1,000 pop.

Non-pulmonary „ „ „ 0.11 „

**New Cases of Tuberculosis Notified during 1955.**

<i>Ages</i>	<i>Pulmonary</i>		<i>Non-Pulmonary</i>	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
0- 1 year .. ..	—	—	—	—
1- 5 years .. ..	—	—	—	—
5-10 „ .. ..	—	—	—	—
10-15 „ .. ..	—	—	—	—
15-20 „ .. ..	—	1	—	—
20-25 „ .. ..	—	2	—	—
25-35 „ .. ..	1	—	—	—
35-45 „ .. ..	1	—	—	1
45-65 „ .. ..	1	1	1	—
65 years and over .. ..	—	—	—	—
Total ..	3	4	1	1

**Number of Cases of Tuberculosis on Register  
at 31st December, 1955, and December, 1954.**

	<i>Pulmonary</i>		<i>Non-Pulmonary</i>		<i>Total</i>	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
31st December, 1954	34	33	16	16	50	49
31st December, 1955	33	36	16	16	49	52

# Comparative Figures for the Notification of Tuberculosis.

## PULMONARY TUBERCULOSIS.

### Notifications.

<i>Ages</i>	1955		1954		1953	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
0- 1 year .. ..	—	—	—	—	—	—
1- 5 years .. ..	—	—	1	—	—	—
5-10 „ .. ..	—	—	1	—	—	—
10-15 „ .. ..	—	—	—	1	—	1
15-20 „ .. ..	—	1	—	—	—	—
20-25 „ .. ..	—	2	—	—	—	—
25-35 „ .. ..	1	—	—	1	1	1
35-45 „ .. ..	1	—	1	2	—	—
45-65 „ .. ..	1	1	3	—	—	2
Over 65 years ..	—	—	—	—	—	—
Totals ..	3	4	6	4	1	4

## NON-PULMONARY TUBERCULOSIS.

### Notifications.

<i>Ages</i>	1955		1954		1953	
	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>	<i>Males</i>	<i>Fem.</i>
0- 1 year .. ..	—	—	—	—	—	—
1- 5 years .. ..	—	—	—	—	1	—
5-10 „ .. ..	—	—	—	—	—	1
10-15 „ .. ..	—	—	—	—	1	—
15-20 „ .. ..	—	—	—	—	—	—
20-25 „ .. ..	—	—	—	1	—	1
25-35 „ .. ..	—	—	1	—	—	—
35-45 „ .. ..	—	1	—	—	—	1
45-65 „ .. ..	1	—	—	—	—	—
Over 65 years ..	—	—	—	—	1	—
Totals ..	1	1	1	1	3	3

## INFECTIOUS DISEASES.

### Dysentery.

39 cases were notified during the year.

This disease, which is dealt with at some length in the introduction, is not only a great nuisance, but can be dangerous, even to life in the case of babies and elderly people.

### Measles.

A very big drop in the number of cases of this disease from last year was expected, as its natural history shows an increase in cases in alternate years. 38 cases were notified this year, and 370 last year.

### Infective Hepatitis.

13 cases were notified. It is probable that this disease is not always treated with the seriousness which it deserves. It may prevent its victim from working for as long as two months, and then not all patients are free from residual disability. The agent of Infective Hepatitis is passed in the stools and one method of spread is by the ingestion of material contaminated by faeces—a mode of spread which has been shown to work in volunteers. This suggests that disinfection of the faeces before disposal and stringent washing by attendants may reduce the incidence. One of the difficulties in the study of this disease is its long incubation period—about one month—and this may prevent a realisation of its infectivity. Anyone who has been in contact with a case should call in the doctor and isolate himself at the first occurrence of symptoms—usually marked loss of appetite and often abdominal pains, which precede the appearance of jaundice by several days.

### Whooping Cough.

13 cases of this disease were notified as compared with 156 last year. It does not seem too optimistic to contribute some of this fall to the increasing habit of carrying out immunisation against the disease combined with that against diphtheria.

### Poliomyelitis.

2 paralytic cases occurred during the year, one being a holiday maker who was probably incubating the disease on arrival in Norfolk. It is important that during the Polio season, people, particularly young people, should not take part in strenuous exercises in order to "work off" pains or stiffness in the limbs which may be the early signs of Poliomyelitis. Such exercises may make paralysis much worse.

# **FACTORIES ACTS, 1937 AND 1948.**

## **PART I OF THE ACT.**

**1.—Inspections** for purposes of provisions as to health (including inspections made by Sanitary Inspectors).

<i>Premises</i>	<i>M/c. line No.</i>	<i>Number on Register</i>	<i>Number of</i>			<i>M/c. line No.</i>
			<i>Inspections</i>	<i>Written notices.</i>	<i>Occupiers prosecuted</i>	
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .. ..	1	70	21	—	—	1
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. ..	2	22	10	—	—	2
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises) .. ..	3	10	22	—	—	3
Total .. ..		102	53	—	—	

**2.—Cases in which Defects were found—**

(If defects are discovered at the premises on two, three or more separate occasions they should be reckoned as two, three or more "cases").

Particulars	M/c. line No.	Number of cases in which defects were found				Number of cases in which prose- cutions were instituted	M/c. line No.
		Found	Remedied	Referred			
				To H.M. Inspector	By H.M. Inspector		
Want of cleanliness (S.1)	4	—	—	—	—	—	4
Overcrowding (S.2) . . . .	5	—	—	—	—	—	5
Unreasonable temperature (S.3) . . . . .	6	—	—	—	—	—	6
Inadequate ventilation (S.4) . . . . .	7	—	—	—	—	—	7
Ineffective drainage of floors (S.6) . . . . .	8	—	—	—	—	—	8
Sanitary Conveniences (S.7)							
(a) Insufficient . . . .	9	1	1	—	—	—	9
(b) Unsuitable or defec- tive . . . . .	10	—	1	—	—	—	10
(c) Not separate for sexes . . . . .	11	—	—	—	—	—	11
Other offences against the Act (not including offences relating to Out- work) . . . . .	12	—	—	—	—	—	12
Total . . . .	60	1	2	—	—	—	60







